

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL									
OMB Number:	3235-0076								
Expires:	April 30, 2008								
Estimated average	burden hours								
per response	16.00								

SEC USE ONLY									
Prefix Seria									
DAT	E RECEIVI	ED							

Name of Offering (□ ch Series C Preferred S		nendment and name l	as changed, and inc	lianta ahamaa \		
Series C Preferred S			ias changea, and inc	neate change.)		
	tock					
Filing Under (Check box(e	es) that apply):	□ Rule 504	□ Rule 505	Rule 50	6 □ Section 4(6)	□ ULOE
Type of Filing: New	v Filing 🔲 A	mendment				
		A. BASIC I	DENTIFICATIO	N DATA		
1. Enter the information re	quested about the	issuer				
Name of Issuer (☐ che	ck if this is an am	endment and name ha	as changed, and indi	cate change.)		
BridgeLux, Inc.					0707	4870
Address of Executive Office	ces	(Number an	d Street, City, State	, Zip Code)	Telepho (menuc	nng Area Code)
1225 Bordeaux Driv	e, Sunnyvale,	CA 94089			(408) 329-5300	
Address of Principal Busin	ess Operations	(Number an	d Street, City, State	, Zip Code)	Telephone Number (Includ	ling Area Code)
(if different from Executive	e Offices) sam	ie			same	
Brief Description of Busine	ess			······································		
Developer and provi	der of high po	wer indium galli	ium nitride ligh	t emitting d	iodes ROCECCE	-
Type of Business Organiza	ation			***************************************	* IOOEOOF	: U
■ corporation	☐ limited parti	nership, already forme	ed 🌼 other (p	lease specify):	12_AUG 1 5 2007	
☐ business trust	☐ limited parts	nership, to be formed			2007	
Actual or Estimated Date of Jurisdiction of Incorporation	-	: (Enter two-letter U	Month Year 1 2 0 2 S. Postal Service at I for other foreign j			

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. oc 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

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Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

	A. BASIC IDEN	TIFICATION DATA	<u> </u>	
 Enter the information requested for the fo Each promoter of the issuer, if the issue Each beneficial owner having the pow the issuer; 	ollowing: her has been organized within er to vote or dispose, or dire	n the past five years; cet the vote or disposition o		
 Each executive officer and director of Each general and managing partner of 	corporate issuers and of corporate issuers and of corporate issuers.	oorate general and managin	g partners of partr	ership issuers; and
Check Box(es) that Apply: ☐ Pr omoter	Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Walker, Robert				
Business or Residence Address (Number and	Street, City, State, Zip Code)		
822 Upland Road, Redwood City, C	A 94062	,		
Check Box(es) that Apply: ☐ Pr omoter	☑ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)	_			
Liu, Heng				
Business or Residence Address (Number and	Street, City, State, Zip Code)		
1225 Bordeaux Drive, Sunnyvale, C	A 94089			
Check Box(es) that Apply: ☐ Pr omoter	□ Beneficial Owner	Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Fan, Gloria				
Business or Residence Address (Number and)		
1225 Bordeaux Drive, Sunnyvale, C	A 94089			
Check Box(es) that Apply: ☐ Pr omoter	□ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Moran, Peter		······		
Business or Residence Address (Number and	•)		
2420 Sand Hill Road, Suite 200, Me	nlo Park, CA 94025			
Check Box(es) that Apply: ☐ Pr omotor	□ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Irwin, M. Scott				
Business or Residence Address (Number and	Street, City, State, Zip Code)		
2440 Sand Hill Road, Suite 200, Me	nlo Park, CA 94025			
Check Box(es) that Apply: ☐ Pr omoter	☐ Beneficial Owner	E Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Mark Swoboda	_			
Business or Residence Address (Number and	Street, City, State, Zip Code)		
1225 Bordeaux Drive, Sunnyvale, C	CA 94089			
Check Box(es) that Apply: ☐ Pr omoter	■ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)		· ·		
El Dorado Ventures VI, L.P.				
Business or Residence Address (Number and	Street, City, State, Zip Code)		
2440 Sand Hill Road, Suite 200, Me	nlo Park, CA 94025			

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. ☐ Executive Officer Director ☐ General and/or Check Box(es) that Apply: ☐ Pr omoter ■ Beneficial Owner Managing Partner Full Name (Last name first, if individual) DCM IV, L.P. Business or Residence Address (Number and Street, City, State, Zip Code) 2420 Sand Hill Road, Suite 200, Menlo Park, CA 94025 Executive Officer ☑ Director ☐ General and/or Check Box(es) that Apply: ☐ Pr omoter □ Beneficial Owner Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) □ General and/or Check Box(es) that Apply: ☐ Pr omoter □ Beneficial Owner ☐ Executive Officer ☐ Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Pr omoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Executive Officer ☐ Director ☐ General and/or Check Box(es) that Apply: Pr omoter ☐ Beneficial Owner Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) □ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Check Box(es) that Apply: Pr omoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Pr omoter □ Beneficial Owner ☐ Executive Officer □ Director □ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) B. INFORMATION ABOUT OFFERING

1	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?															×									
2	2.	What i	s the r	minin	num ir	ivesi	ment t	hat w	ill be a	accep	ted fro	m an	y indi	vidua	l?								\$		N/A
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	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND U	SE O	F PROCEED	<u>s</u>	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\sigma\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				-11
	Type of Security		Aggregate fering Price	Am	ount Already Sold
	Debt	\$		s	
	Equity	\$	22,999,995	\$	22,999,995
	☐ Common ☑ Preferred				
	Convertible Securities (including warrants)	\$		\$	
	Partnership Interests	<u>\$</u>	 	\$	
	Other (Specify)	S		s	
	Total	<u>\$</u>	22,999,995	\$	22,999,995
	Answer also in Appendix, Column 3, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Accredited Investors	Num	ber Investors		22,999,995
	Non-accredited Investors		0	\$	0
	Total (for filings under Rule 504 only)			<u></u>	
	Answer also in Appendix, Column 4, if filing under ULOE.				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.				
	Type of offering		Type of Security	Do	llar Amount Sold
	Rule 505			\$	
	Regulation A			\$	
	Rule 504			\$	
	Total			\$	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees			\$	
	Printing and Engraving Costs			\$	
	Legal Fees		<u> </u>	\$	120,000
	Accounting Fees			\$	
	Engineering Fees			\$	
	Sales Commissions (specify finders' fees separately)			\$	
	Other Expenses (identify) (blue sky filing)		x	\$	300
	m		(F)	\$	120,300

^{*} Includes Common Stock issuable upon conversion of the Preferred.

	D. OFFERING PRICE, NUMBER	OF INVESTORS, EXTENSES	11 (1	COL OI I RO	CLL	<u> </u>	
	b. Enter the difference between the aggregate offe Question I and total expenses furnished in response to the "adjusted gross proceeds to the issuer."	Part C - Question 4.a. This different	ce is			\$	22,879,695
5.	Indicate below the amount of the adjusted gross proceed for each of the purposes shown. If the amount for any and check the box to the left of the estimate. The to adjusted gross proceeds to the issuer set forth in respon	purpose is not known, furnish an estiputal of the payments listed must equal	mate	:			
				Payments to Officers, Directors, & Affiliates		P	Payments To Others
	Salaries and fees			\$	_ 0	\$	
	Purchase of real estate			\$	_ 0	\$	
	Purchase, rental or leasing and installation of maci	ninery and equipment		\$	_ 🗆	\$	
	Construction or leasing of plant buildings and faci	lities		\$	_ 🗆	\$	
	Acquisition of other businesses (including the value offering that may be used in exchange for the assest pursuant to a merger)	ts or securities of another issuer		\$	D	\$	22,879,695
			_			\$	
	Column Totals			\$	x	\$ —	22,879,695
	Total Payments Listed (column totals added)			B \$	22,8	79,69	95
_	D.	FEDERAL SIGNATURE					· · · · · · · · · · · · · · · · · · ·
sigi	issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to furnish ormation furnished by the issuer to any non-accredited in	to the U.S. Securities and Exchange	Com	nmission, upon wr			
Issı	er (Print or Type)	Signature /			Date		
Ві	idgeLux, Inc.	(Kn/2		8/_	03	_/ 07	
Nar	ne of Signer (Print or Type)	Title of Signer (Print or Type)					
GI	oria Fan	Chief Financial Officer					

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ATTENTION _

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)